

FEC
FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC AFFAIRS

15 FEB -5 PM 2:08
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.

12FE4M5

FRIENDS OF CHRIS MCDANIEL

ADDRESS (number and street)

POST OFFICE BOX 125

Check if different
than previously
reported. (ACC)

LAUREL

MS

39441

- 2.
- FEC IDENTIFICATION NUMBER ▼**



C00550657

3. IS THIS
-
- REPORT

NEW
(N)

OR

AMENDED
(A)

ZIP CODE

STATE ▼

DISTRICT

MS

00

- 4.
- TYPE OF REPORT**
- (Choose One)

- (a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

- (b) 12-Day
- PRE**
- Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
06 24 2014in the
State of

MS

- (c) 30-Day
- POST**
- Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
05 15 2014

through

M M / D D / Y Y Y Y
06 04 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DAWN WALTERSSignature of Treasurer DAWN WALTERS

Date

M M / D D / Y Y Y Y
01 30 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
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(Revised 02/2003)